

gency nurse detachments, sanitary training sections, information sections, refreshment units and detachments, supply depots, general hospitals, and convalescent homes. Details of these various organizations will be given later. Volunteers, both men and women, have a long list of activities from which to select their preference, for service anywhere, in the United States only, or at residence only. The work of the Red Cross is so varied that every person can find something he can do, no matter what his circumstances, and can do it with the certain knowledge that it will count. Physicians can organize, teach in Red Cross instructional courses, help administer, assist in publicity work, or engage in other available local activities, even if they can not enroll for service with the sanitary forces.

THE ALCOHOL QUESTION.

II. ALCOHOL AND THE WAR.

Several ways present themselves whereby the alcohol question assumes importance in war. Moreover these considerations have a peculiar significance in their immediate application to war conditions in the United States today. What is the direct influence of alcohol on the individual efficiency of the fighting forces? That question must be squarely answered. What are the indirect results of the use of alcohol, for instance as regards increased susceptibility to disease, and increased exposure to prostitution and venereal disease? Finally is it logical to preach food conservation and allow the present quantity of foodstuffs to be used for manufacture of alcoholic beverages? In short, is alcohol going to help materially in winning the war, or can it have any influence on the war? The former questions were in part answered editorially last month. The last question especially concerns us here.

Numerous estimations have appeared regarding the bulk of food materials used for manufacture of alcoholic drinks. A conservative and authoritative statement seems to be furnished by the War Prohibition Committee, consisting of Professors Carver, Day, Ripley and Gay of the Harvard University Department of Economics, and Dr. Irving Fisher, professor of political economy in Yale University. (Am. J. Pub. Health, 1917, June, VII, 581). This statement quotes from the report of the Commissioner of Internal Revenue for the fiscal year of 1916 (pg. 138) a total of 3,603,911,916 pounds of molasses and grain used in that year for the production of distilled liquors. This excludes wheat, barley, oats, and "other materials" aggregating 82,150 pounds. On the basis of carefully studied data, the committee estimates that for the same year 3,390,399,219 pounds of the same food materials were used for the manufacture of fermented liquors. Thus it appears that in the fiscal year of 1916 a total of 6,994,311,135 pounds of grain and molasses were used in the manufacture of fermented and distilled liquors in the United States, not to mention fruits, glucose and minor ingredients.

These figures were reviewed by a second committee composed of Professors Percy G. Stiles, Walter B. Cannon and Irving Fisher, who state that probably one-sixth of the total of seven billion pounds would be necessary for the production of denatured alcohol, and that the remaining five-sixths by conservative estimate would supply the caloric requirement for a year of seven million men.

In a letter to the New York Times (May 27, 1917), Professor Fisher emphasizes that the manufacture of these grains into alcoholic beverages results in a loss of approximately eleven million one pound loaves of bread each day, enough to furnish one pound of bread per man daily to the combined armies of England and France. He states further that this loss represents "5½ per cent. of the total food values consumed by human beings in the United States, over 10 per cent. of the total consumption of breadstuffs in the United States, 13 per cent. of the wheat consumed in the United States, and 25 per cent. of the wheat exported from the United States in 1916."

These figures are not to be held lightly. If there is occasion in fact,—and adequate surveys seem to indicate that there is,—for national control of production and distribution of food supplies to the end of averting definite food shortage for ourselves and our allies, then *pari passu* the question of manufacture of alcoholic beverages becomes of vital moment. How far such manufacture should be restricted and for what period it should be restricted can only be decided rightly by expert judgment of all the factors concerned, such as the nature and degree of food shortage, and the temporary dislocation of industry and paralysis of capital which might follow. Parenthetically it may be said that this dislocation of industry could in no wise approach that resulting from calling to the colors even the first contingent of the new army. Moreover the removal of the army drafts from industry would more than supply occupation to the group thrown out of employment by cessation of alcoholic manufactures. Nor in a generation of "war brides," war shipping opportunities and all the unusual demands added to the ordinary opportunities for capital investment, is a serious paralysis of capital to be feared.

It is a matter of pertinent interest that at its annual meeting in Cincinnati, May 9-11, 1917, the National Association for the Study and Prevention of Tuberculosis adopted the following resolution, "That this Association place itself on record as favoring national prohibition both for soldiers and civilians during the war period and for one year thereafter." With a distinguished membership and attendance drawn from the most eminent of America's physicians, the American Society for Clinical Investigation unanimously adopted the following resolution at its annual meeting at Atlantic City in May, 1917: "Resolved, that in the critical condition of the world's food supply we consider it desirable that the manufacture of alcoholic beverages and their importation into this

country be prohibited for the duration of the war and for at least one year thereafter." These resolutions are examples of many and illustrate the present trend of medical and scientific opinion based on the present conception of the action of alcohol, and of the relation of alcohol to the conduct of war.

THE MEDICAL DEFENSE RULES.

The Secretary's office has mailed to each member of the Society a printed copy of the MEDICAL DEFENSE RULES. Members have been requested to familiarize themselves with the Rules, and we wish to impress again upon the members how much it is to their interest to do so.

The compilation and restatement of our MEDICAL DEFENSE RULES and putting them in the hands of every member is one of the most important steps taken by the Council for the welfare of the entire Society. While the general tenor of some of the Rules has been known to nearly all of our members, the exact text has never been carefully and accurately stated and placed directly in the hands of each member. Heretofore, discussion has been had in sporadic cases as to the application of a given rule, which would have been avoided had members been given an opportunity to familiarize themselves with these provisions. It is earnestly suggested to our members that strict compliance with the rules will do much for the benefit of the Society; and in a particular case it may be vital to the individual's interest.

We have already taken occasion to comment in these columns upon the rule regarding election between defense by an insurance company (if a member is insured), and defense by the Society. We again repeat that this rule was adopted and has been kept in force solely because the funds are not available to afford defense by the Society in every case. Therefore, the Council felt that in requiring members to make such election the greatest good was given to the greatest number. We trust, that as our organization grows, it will be possible to revoke this rule.

We have also, from time to time, heard and participated in discussions concerning the so-called X-ray rule. Members seem to be more or less apprehensive that this rule will deprive them of defense by the Society in cases arising out of treatment of injury to bone or joint. The rule has no such effect. It expressly provides that the discretion of the Council should be exercised in every case where any reasonable grounds exist for excuse of failure to take X-ray plates. The Council uniformly exercises a sane and common sense judgment and excuses such omission. Of course, every case must depend upon itself; and a member cannot expect such favorable ruling if he recklessly and intentionally failed to exercise reasonable and ordinary precaution.

May we ask the members in considering the Rules to remember that they represent the com-

bined judgment of men, most of whom have been at the head of the Society's affairs for many years, and who have had the benefit of all the precedence available, to-wit: eight years of experience throughout the life of our Legal Department.

MEDICAL WOMEN AND THE WAR.

Medical women have organized in various parts of the country for the purpose of offering their services to their country in the present emergency. Unfortunately no means has as yet been devised whereby the government or any of its allied bodies can take advantage of these offers, because there is no recognition of physicians of the female sex in either the Army or the Navy. This, of course, prevents the Red Cross from using these women to the full in capacities where they might excel because they are unable to join the Medical Reserve Corps of the Army or Navy. This is exactly as it was in England at the outbreak of the war three years ago. The English medical women, in spite of the inability immediately to get recognition, were able, because of the pressing need, to establish hospitals in France and so to demonstrate their ability to be of real and valuable service to the cause for which their men were giving their lives. After that they were enrolled definitely as a part of the medical staff of the army and were given the rank to which their positions entitled them.

We know of one woman (not a physician) who served in France as a Nurse's Aid with the rank of Corporal, and of another who was Matron in a base-hospital with the rank of Colonel in the British Army. We understand that the pay of these women is not quite that of men of the same rank, but cannot state this authoritatively.

We know that in this country women physicians have been asked by representatives of the Red Cross to organize groups to aid, without pay or rank, in the rehabilitation work in France. This we feel to be inconsistent. If the Government, or the Red Cross, does not wish the services of women for any particular reason, well and good, but if these services are to be used, there should be no distinction. *She* is just as much a surgeon when in the operating-room as is *he*. Why should John Smith, M. D., an anesthetist, be a Second Lieutenant, and Mary Brown, M. D., an anesthetist, be a Nurse's Aid without authority?

REGISTRATION FEES.

Every licentiate has received a slip announcing that a registration fee of two dollars per annum has been imposed upon them by the legislature at the recent session. While this is presumably a "registration fee," it is really a tax for raising funds for the prosecution of violators of the Medical Practice act. The Board of Medical Examiners have not been able, with the funds accruing from the fines of convicted miscreants, to pursue a sufficiently vigorous campaign of elimination of